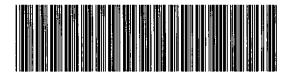
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(Requestor's Name)
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
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COVER LETTER

TO:	Registration Section Division of Corporations	₹ **
SUBJE	Cretin Hop, LLC	
SODE		Limited Liability Company
The end	closed Articles of Organization and fee(s	s) are submitted for filing.
Please r	return all correspondence concerning thi	s matter to the following:
	Brett Ippolito	
		Name of Person
	Brett Ippolito	
		Firm/Company
	7911 Lovegren Lane	
		Address
	Gibsonton, FL 33534	
	brett.ippolito@gmail.com	City/State and Zip Code
	E-mail address: (to be a	used for future annual report notification)
For furthe	er information concerning this matter, pl	lease call:
	Brett Ippolito	813 312-2089
	Name of Person	Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:	
]\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	,			
The name of the Limited Liabilit	y Company is:			FILED
Costin Ham III C				16 JAN 25 PH 2: 41
Cretin Hop, LLC				
(Must end	with the words "Limited	d Liability Compan	y, "L.L.C.," or "LLC.")	TARY OF STATE
ARTICLE II - Address:				to the control by a figure 1.
The mailing address and street ad	ddress of the principal of	office of the Limited	d Liability Company is:	
<u>Princip</u>	al Office Address:		Mailing Add	lress:
Brett Ippolito		Bre	tt Ippolito	
7911 Lovegren Lane		791	l Lovegren Lane	
Gibsonton, FL 33534		Gib	sonton, FL 33534	
The name and the Florida street	Mark Ippolito	Name		
	7911 Lovegren Lane	e		
	Florida street addres		acceptable)	
	Gibsonton	FL	33534	
	City	State	Zip	
laving been named as registered of place designated in this cert, ficate,	I hereby accept the app	pointment as register		t in this capacity. I

(CONTINUED)

Page 1 of 2

l'itle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager MGR	Brett Ippolito
WOR	7911 Lovegren Lane
	Gibsonton, FL 33534
AMBR	Brett Ippolito
	7911 Lovegren Lanc
	Gibsonton, FL 33534
······	
(Use attachment if necessary)	
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ctive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will not
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